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CURRENT CORRESPOND	DENCE ADDRESS (Note: Use B	lock I for any change of addr	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.							
EDWARDS & P.O. BOX 5587 BOSTON, MA	k ANGELL, LLP	/2007		I hereby certify that States Postal Service addressed to the M transmitted to the U	Certificate this Fee(e with sur fail Stop SPTO (57	e of Mailing or Trans (s) Transmittal is being flicient postage for fir ISSUE FEE address 71) 273-2885, on the d	pission deposited with the United st class mail in an envelope above, or being facsimile ate indicated below.			
5/24/2007 HDEMESS2	00000036 041105 0	9590221			$\overline{}$		(Depositor's name)			
	00.00 DA			$\overline{}$		•	(Signature)			
2 FC:8001	30.00 DA		·				(Date)			
APPLICATION NO.	TON NO. FILING DATE		FIRST NAMED INVENT	TOR	ATTO	DRNEY DOCKET NO.	CONFIRMATION NO.			
09/590,221	09/590,221 06/08/2000		Nobuo Ogata				1363			
TITLE OF INVENTIOR	N: RECORDING AND R	EPRODUCING APP	ARATUS AND RECORD	ING MEDIUM						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID IS	SUE FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1400	\$0	\$0	\$0 \$1400		06/01/2007			
EXAM	MINER	ART UNIT	CLASS-SUBCLASS							
CHU, KI	M KWOK	2627	369-047000	:						
CFR 1.363). Change of correst Address form PTO/S "Fee Address" inc	dence address or indication pondence address (or Chas B/122) attached. distribution (or "Fee Address of or more recent) attact.	(1) the names of u or agents OR, alter (2) the name of a s registered attorney er 2 registered patent	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME A	AND RESIDENCE DAT.	A TO BE PRINTED (ON THE PATENT (print o	r type)						
PLEASE NOTE: Ur recordation as set for (A) NAME OF ASS	rth in 37 CFR 3.11. Com	tified below, no assig pletion of this form is	nce data will appear on the NOT a substitute for filing (B) RESIDENCE: (C	an assignment.			ocument has been filed for			
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) are submitted: No small entity discount # of Copies10	A check is enclose Payment by credit	 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. ™ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 04-1105 (enclose an extra copy of this form). 							
a. Applicant clair	atus (from status indicatens SMALL ENTITY stat	us. See 37 CFR 1.27.	b. Applicant is no	longer claiming SN	1ALL EN	ITITY status. See 37 C	FR 1.27(g)(2).			
NOTE: The Issue Fee a interest as shown by the	nd Publication Fee (if requestion records of the United Sta	uired) will not be accorded Patent and Trader	epted from anyone other th nark Office.	an the applicant; a	egistered	attorney or agent; or the	ne assignee or other party in			
Authorized Signature	Now Or	Manus		DateM	lay 22	2, 2007				
Typed or printed nam	ne Peter J. 1	Manus		Date <u>May 22, 2007</u> 26,766 Registration No.						
This collection of inform	mation is required by 37	CFR 1.311. The inform	nation is required to obtain	or retain a benefit l	y the pub	olic which is to file (an	d by the USPTO to process)			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTO/SB/17 (02-07)

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Effe	L	Complete if Known											
Fees pursuant to the Consol	818).	Application Num		9/590,221-Conf. #1363									
FEE TR	L			June 8, 2000									
Fo	L			Nobuo Ogata									
	-	Examiner Name		K. K. Chu									
Applicant claims sr	Applicant claims small entity status. See 37 CFR 1.27					2627							
TOTAL AMOUNT OF PAYMENT (\$) 1,430.00				Attorney Docket No. 49899(70904)									
METHOD OF PAYMENT (check all that apply)													
Check Credit Card Money Order None Other (please identify):													
X Deposit Account D	x Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP												
For the above-ide	entified deposit	account, the Direc	ctor is l	hereby authorize	d to: (checl	k all that apply)							
x Charge fee	(s) indicated be	low		Charge	e fee(s) indi	icated below, ex	cept for t	he filing fee					
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17													
FEE CALCULATION						·							
1. BASIC FILING, SEAR	=												
	FILIN	G FEES Small Entity	SEA	RCH FEES Small Entity	EXAMIN	ATION FEES							
Application Type	Fee (\$)		ee (\$)	Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees I	Paid (\$)					
Utility	300	150	500	250	200	100							
Design	200	100	100	50	130	65							
Plant	200	100	300	150	160	80							
Reissue	300	150	500	250	600	300							
Provisional	200	100	0	0	0	0							
2. EXCESS CLAIM FEES	3						F== (#)	Small Entity					
Fee Description Each claim over 20 (incl		Fee (\$)	Fee (\$)										
Each independent claim		50 200	25 100										
Multiple dependent clain							360	180					
Total Claims Ext	ra Claims F	ee (\$)	Fee Pa	aid (\$) Mu		Itiple Depende							
6	×	=					ee Paid (5)					
HP = highest number of total	claims paid for, if gr	eater than 20.											
I		ee (\$)	Fee Pa	nid (\$)									
2 -3 = HP = highest number of indep	endent claims naid	for if greater than 3											
3. APPLICATION SIZE F	•	nor, ii greater than 5.											
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).													
Total Sheets	Extra Sheets				tion thoroaf	Eog (\$)	Eco	Daid (\$)					
	Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) 100 = /50 (round up to a whole number) x =												
4. OTHER FEE(S) Fees Paid (\$)													
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1501 Utility issue fee 1,400.00													
Other (e.g., late filing	•	1,400.00 30.00											
SUBMITTED BY A													
Signature	2th 1/1	Janun		Registration No. Attorney/Agent)	26,766	Telephone	(617) 51	7-5530					
Name (Print/Type) Peter J. Manus						Date	May 22	, 2007					
													

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service as Express Mail, Label No. EM054393186US, on the date shown below in an envelope addressed to:

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Dated: May 22, 2007 Signature:

Caurie Brown)